Turbo

4-Door

Stationwagon

Pick Up Truck Other_

X No

FOR AGENCY USE ONLY **Auto Safety Hotline** Date Received Vehicle Owner's Questionnaire Dd or U.S. Department of Transportation rt_dt NATIONWIDE 1-800-424-9393 bd_rt National Highway DC METRO AREA (202) 366-0123 09-JAN-2001 Traffic Safety ıp_ltr INTERNET: http://www.nhtsa.dot.gov Administration Reference No. 739056 Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

[YES] In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer. ∏NO Signature of Owner Date VEHICLE INFORMATION Vehicle Ident, No. (VIN.) Venide Make Current Odometer Reading Vehicle Model Vehicle Year (Located at pottom of ndan eid on ditkefa side GRAND CHEROK 1997 JEEP Purchase Date Engine Size Diesel Dealer's Name (CID/CC/L 318 01-MAR-2098 Gas Fuel Injection No Cylinders New **X**Used ∠ip Code Transmission Type Autilbut Brakes Restraint System Cruise Control | Drive Train Vehicle Type Body Style 2-Door 7Car Sport Ult Yes ☐ 3-Point Belt 🗶 Front ■ Manual ☐ Yes ∀ап Truck Rear Vinivan ▼ Driverside Airbag 2-Point Belt Motorcycle <u>x</u> No 4-Wheel X Automatic No Other_ Passengerside Airbag FAILED COMPONENT(S)/PART(S) INFORMATION Component Par. Name(s) Location Failed Part(s) 02700000 TIRES Left ☐ Right Original Repr Frant Replacement NHTSA Previously Failed Part(s) No of Hallures 12-CCT-2000 Dateis) of Failureis) Contacted? Available? Mileage at Failure(s) 5600C 1 Vehicle Speed at Failure(s). 45 ٦Yes Yes APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form: Number of Persons Injured Estimated Property Damage Number of Fatalities Reported to Police Crash Fire ~es U 1 ΠYes ☐ Yes 🟋 No NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

AT 45 MPH ON SMOOTH HIGHWAY TIRE SUDDENLY BLEW OUT AND WE IMMEDIATELY PULLED OVER. THE TIRE WAS DEMOLISHED TO THE POINT WE COULD NOT TELL WHAT THE CAUSE WAS OR THE TIRE REPAIR MAN. THIS TIRE HAD APPROXIAMATELY 2000 MILES ONLY ON IT AT THE TIME. *AK

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974-Public Law 90-979 This information is requested pursuant to authority vested in the National Highway. Traffic Safety Act and subsequent amendments. You are uncering obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Dd or rt_dt bd_rt

ıp_ltr

□NO

318

Sport Ult

Motorcycle

Failed Part(s)

□ Original

NHTSA Proviously Contocted?

Yes

Replacement

□No

Truck

Reference No. 739056

Current Odometer Reading

turtio

Diesel

Gas Fuel Injection

Body Style 2-Door

4-Door Stationwagon

Pick Up Truck Other_

AGENCY USE ONLY

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U.S. Department of Transportation National Highway Traffic Safety Administration		Auto Safety Hotline Vehicle Owner's Questionnaire NATIONWIDE 1-800-424-9393 DC METRO AREA (202) 366-0123 INTERNET: http://www.nhtsa.dot.gov			Date R	Uate Received 09-JAN-2001	
Do you authorize NHTS	SA to provid	de a copy o	f report to the manufactu !!!!. NOT provide your na	rer of your vehicl	e?	□YES	
in the absence of an au Signature of Owner	inonzation	, NHISA W				e manuracture ate//_	
Control of the Control				NFORMATION			
Vəhiclə Idənt, No. (VIN.)	(Lobered at Andersedion	: oattern of addyede elde	Vehide Viske			ehide Year	
			FIRESTONE	WILDERNES	SS A 1	900	
Purchase Date 01-MAR-2098	Dealers	Dealer's NameState Zip				Engine Size (CID/CC/L	
New X Used	City					No Cylinders _	
Transmission Type Autil	ock Brakes	रिक्ष्मीकांची S	ystem	Cruise Control D	rive Train	Vehicle Typa	
☐ Manual ☐ ☐ Automatic ☐] Yes 【] No		Belt		▼ Front Rear ∠-Wheel	Car Van Other	
		FA	ILED COMPONENT	(S)/PART(S)	INFORM	ATION	
Component Pan 62766606 TIR	: Name(s) ES			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Location Left	Right	
4	Dateis) of F Mileage at F Vehicle Spe		12-CCT-2000 56000 5(si 45		•	Failed Part(s Available? ☐Yes ☐N	
			APPLICATION	INCIDENT II	NFORMA	TION	

IATION

(Please describe in detail the incident(s), Hallure(s), Crashies), and injury(les) on the back of this form:

١.										
Ciasli Fire		Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Palice				
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П	□ "es □ No	∏ Yes 🟋 No	, , , , , , , , , , , , , , , , , , ,	'		Tes K INo				
Ιl										
	NASSATIVE DECOSISTION OF EAR USE(O) INCIDENT/O) IN USE/VIEOS									

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

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